PTO/SB/06 (12-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD																
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SEARCH FEE						_		1				1				
(37 CFR 1.16(k), (i), or (m))  EXAMINATION FEE			$\dashv$				┨	<del> </del>			1	ļ				
(37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS			<del></del>	<del></del>	$\dashv$				-						<u></u>	
(37 CFR 1.16(i))				minus 2	0 = '				]	×	=		OR	X =		
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APPLICATION AS AMENDED – PART II																
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<ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</li> <li>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</li> </ul>																

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

				Application or Docket Number								
	PATENT A	PPLICATIO Effecti	RD	10/667998								
CLAIMS AS FILED - PART I (Column 1) (Column 2)									YTITY	OTHER THAN OR SMALL ENTITY		
то	TAL CLAIMS		37				R/	TE	FEE		RATE	FEE
FO			NUMBER F	ILED	NUMBER EXTRA		BASI	C FEE	375.00	OR	BASIC FEE	750.00
то	TAL CHARGEA	BLE CLAIMS	37 min	us 20=	*	7	XS	9=		OR	X\$18=	304
IND	EPENDENT CL	AIMS	(e <sup>′</sup> mir	nus 3 =	. 3		X42=			OR	X84=	XV
MU	LTIPLE DEPEN	DENT CLAIM PE	RESENT	+140=			OR	+280=	N			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1305
CLAIMS AS AMENDED - PART II								IAL		Jon	OTHER	Ţ
	(Column 1) (Column 2) (Column 3)						SM	ALL	ENTITY	OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R/	NTE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							40=		OR	+280=	
	- L-70 21, 27, 22									OR	TOTAL	
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AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	] [	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	R/	NTE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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FIRST PRESENTATION OF MULTIPLE DEPENDE							┙┝╌				.000	
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